PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/773,538			ing Date 06/2004	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
	BASIC FEE	_	N/A	LD NO	N/A		N/A	TEE (a)	ł	N/A	TEE (8)
┢	(37 CFR 1.16(a), (b), s SEARCH FEE	or (c))	N/A						ł		
H	(37 CFR 1.16(k), (i), (ii)		N/A	_	N/A		N/A		l	N/A	
TO	(37 CFR 1.16(o), (p), (N/A		N/A		N/A			N/A	
(37	CFR 1.16(i)) EPENDENT CLAIM	s	minus 20 = *			ı	x \$ =		OR	x s =	
(37	CFR 1.16(h))		minus 3 = *			ı	x \$ =		ı	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drawings essents of paper, the application sizes \$250 (\$125 for small entity) for eadditional 50 sheets or fraction the 35 U.S.C. 41(a)(1)(G) and 37 CFR								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL	
	APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY			
AMENDMENT	CLAIMS			HIGHEST						r	
	10/03/2008	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	• 9	Minus	 20	= 0		X \$26 =	0	OR	x s =	
١Ħ	Independent (37 CFR 1.16(h))	• 3	Minus	3	= 0		X \$110 =	0	OR	x s =	
ΜĒ	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
L		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Z.	Total (37 CFR 1,16())		Minus	••		l	x \$ =		OR	x \$ =	
AMENDMENT	Independent (37 CFR 1.16(h))		Minus	***			x \$ =		OR	x s =	
Ш	Application Size Fee (37 CFR 1.16(s))]		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
Γ									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.											

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